PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 **CLAIMS AS FILED - PART I** SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE [OR SMALL ENTITY **TOTAL CLAIMS** RATE FEE RATE FEE **FOR** NUMBER FILED BASIC FEE NUMBER EXTRA 385.00 BASIC FEE 770.00 OR TOTAL CHARGEABLE CLAIMS minus 20= X\$ 9= X\$18= OR INDEPENDENT CLAIMS minus 3 = X43= X86= OR MULTIPLE DEPENDENT CLAIM PRESENT +145= +290= OR * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL AIMS AS AMENDED - PART II OTHER THAN (Column 1) SMALL ENTITY SMALL ENTITY (Column 2) OR (Column 3) CLAIMS HIGHEST ADDI-REMAINING ADDI-NUMBER PRESENT ENDMENT RATE TIONAL **AFTER** RATE **PREVIOUSLY** TIONAL **EXTRA** AMENDMENT PAID FOR FEE FEE Total Minus X\$ 9= X\$18= OR Independent Minus = X43= X86= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145= +290= OR TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST œ ADDI-ADDI-REMAINING NUMBER **PRESENT** AMENDMENT AFTER **PREVIOUSLY** RATE TIONAL RATE TIONAL **EXTRA** AMENDMENT PAID FOR FEE FEE Total Minus X\$ 9= X\$18= OR **Independent** Minus *** X43= X86= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145= +290= OR TOTAL OR ADDIT. FEE ADDIT, FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING ADDI-NUMBER ADDI-PRESENT AMENDMENT AFTER **PREVIOUSLY** TIONAL RATE . **EXTRA** RATE TIONAL AMENDMENT PAID FOR FEE FEE Total Minus X\$ 9= X\$18= OR Independent Minus ·X43= X86= FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR +145= +290= OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR ADDIT. FEE

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10625850

CLAIMS AS FILED - PART I								SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY						
			(Column 1) IS	(Colun	in 2)	l -			OR F						
TOTAL CLAIMS							L	RATE	FEE	-	RATE	FEE				
FOR			NUMBER FILED		NUMBE	R EXTRA	-	BASIC FEE	375.00	OR	BASIC FEE	7 70 .00				
TOTAL CHARGEABLE CLAIMS			7 minu	ıs 20= '	* -			X\$ 9=		OR	X\$18=					
INDEPENDENT CLAIMS			/minus 3 = *					X42=		OR	X84=					
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=					
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	L	TOTAL		OR	TOTAL	170				
CLAIMS AS AMENDED - PART II									- i i	6 D	OTHER					
			(Column 2)			_	SMALL E		OR	SMALL						
NT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE				
DME	Total	*	Minus	**		=	X\$ 9=	X\$ 9=		OR	X\$18=					
AMENDMENT	Independent	*	Minus	***		=	1	X42=		OR	X84=					
<	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=					
	•						L	TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE					
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_		(Column 1) CLAIMS		(Colun		(Column 3)	Г		ADDI-	I	· -	ADDI-				
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE				
	Total	*	Minus	**		= '		X\$ 9=		OR	X\$18=					
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	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+140=		OR	+280=					
								TOTAL		OR	TOTAL ADDIT. FEI					
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	Land Company of the State of th	(Column 1)	भून १० अ <u>लेक्स्</u>	(Colui		(Column 3)	٦,		(DD)	7		ADDI-				
N C		REMAINING AFTER AMENDMENT		RUM PREVI	888	FRESENT		RATE	ADDI- TIONAL FEE		RATE	TIONAL				
AMENDMENT	Total	*	Minus	**	<u> </u>	=		X\$ 9=		OR	X\$18=					
HEN HE	Independent	*	Minus	***		=		X42=		OR	V04-					
₹	•	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM	4		7,72-	 	104	-	 				
								+140=		OR						
1 -	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"									OR	ADDIT. FE					
1.			Daid Ear IN TH	IIC CDA(1-	**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

FORM PTO-875 (Rev. 12/02)